

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90071 026 ***150.00

DOCUMENT # P02000039027

1. Entity Name
KRISS CORP.



Principal Place of Business
**7000 W PALMETTO PARK ROAD SUITE 402
BOCA RATON FL 33433**

Mailing Address
**7000 W PALMETTO PARK ROAD SUITE 402
BOCA RATON FL 33433**



2. Principal Place of Business
2700 N M. 1st St Tr
Suite, Apt. #, etc.
Suite 350

3. Mailing Address
2700 N M. 1st St Tr
Suite, Apt. #, etc.
Suite 350

☒ CHECK HERE IF MAKING CHANGES

City & State
Boca Raton
Zip
FL

City & State
Boca Raton FL
Zip
33431

4. FEI Number
043642744

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

GREENFIELD, STEVEN B ESQ
7000 W PALMETTO PARK ROAD SUITE 402
BOCA RATON FL 33433

7. Name and Address of New Registered Agent

Name
HENRY JANUS
Street Address (P.O. Box Number is Not Acceptable)
2700 N M. 1st St Tr
Suite 350
City
Boca Raton FL Zip Code
33431

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

(NOTE: Registered Agent signature required when reinstating)

DATE

4/27/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
DPST
NAME
JANUS, HENRY
STREET ADDRESS
7000 W PALMETTO PARK ROAD SUITE 402
CITY-ST-ZIP
BOCA RATON FL 33433

☐ Delete

TITLE
NAME
STREET ADDRESS
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
2700 N M. 1st St Tr
Boca Raton FL 33431

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/27/03 **361 9849829**

CR2E034 (10/02)